

Patent and Trademark Office: U.S. Department of Commerce

COMPLETE IF KNOWN

PTO/SB/17		Application Number	09/903,368	
FEE TRANSMITTAL		Filing Date	07/11/2001	
		First Named Inventor	William P. Tanguay	
		Group Art Unit	2836	
		Examiner Name	Sharon A. Polk	
Total Amount of Payment (\$)		84.00		
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEES		
Deposit Account Number	01.2000		Large Entity Fee Code (\$)	Small Entity Fee Code (\$)
Deposit Account Name	ANDRUS, SCEALES, STARKE & SAWALL, LLP		Fee Description	Fee Paid
<input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17		<input type="checkbox"/> Charge the Issue fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance. 37 CFR 1.311(b)		
2. <input type="checkbox"/> Payment Enclosed:		<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other
FEE CALCULATION (fees effective 10/01/96)				
1. FILING FEE				
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
101 740 201 370	Utility filing fee			
106 330 206 165	Design filing fee			
107 510 207 255	Plant filing fee			
108 740 208 370	Reissue filing fee			
114 160 214 80	Provisional filing fee			
SUBTOTAL (1) (\$)				
2. CLAIMS				
Fee From below				
Total claims	16 - 20 = (4)	X	=	
Independent Claims	4 - 3 = 1	X \$84	=	\$84.00
Multiple Dependent Claims		X	=	
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description		
103 18 203 9	Claims in excess of 20			
102 84 202 42	Independent claims in excess of 3			
104 280 204 140	Multiple dependent claim			
109 84 209 42	Reissue independent claims over original patent			
110 18 210 9	Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)		\$84.00		
Other fee (specify)				
Other fee (specify)				
* Reduced by Basic Filing Fee Paid				
SUBTOTAL (3)				
FAX RECEIVED Complete (if applicable)				
SUBMITTED BY				
Typed or Printed Name	Joseph D. Kuborn			Registration Number MAY 1 340,689
Signature			Date	5/19/03
Deposit Account User ID				
TECHNOLOGY CENTER 2000				